

Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report OF BEVERLY Municipal Form RECEIVED AND RECORDED CITY CLERKS OFFICE

2021 JAN 19 A 11: 19

File with:

City or Town Clerk or Election Commission

1/17/2021

Reporting Period - Beginning: 1/1/2020	Ending: 12/31/2020
Type of report: Year-end	
Paul Guanci	Committee to re-elect Paul Guanci
Full Name of Candidate	Committee Name
City Council At large	Linda Blount
Office Sought/ District	Name of Committee Treasurer
54 Cross Lane	43 Fairview Ave
Beverly, MA 01915	Beverly, Ma 01915
Residential Address	Committee Address
Ending Balance from previous re Total receipts this period: Subtotal: Total expenditures this period: Ending Balance: Total inkind contributions this Total outstanding liabilities:	\$0.00 \$1,319.08 \$214.42 \$1,104.66
Affidavit of Committee Treasurer: I certify that I have examined this report, including attached belief, a true and complete statement of all campaign finance expenditures, disbursements, inkind contributions and liabilifinance activity of all persons acting under the authority or requirements of M.G.L. c. 55.	e activity including all contributions, loans, receipts, ities for this reporting period and represents the campaign
Signed under the penalties of perjury:	
Mugh M Ston	1/17/2021
Treasurer's signature (in ink)	Date
Affidavit of Candidate (check 1 box only) :	
Candidate with Committee and no activity independent	
I certify that I have examined this report, and attached sche true and complete statement of all campaign finance activity, this committee in accordance with the requirements of M.G.L.	of all persons acting under the authority or on behalf of

any liabilities nor made any expenditures on my behalf during this reporting period.

requirements of M.G.L. c. 55.

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Signed under the penalties of perjury:

Candidate without Committee OR candidate with independent activity filing separate report. I certify that I have examined this report and attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity including contributions, loans, receipts, expenditures,

disbursements, inkind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the

Schedule A: Receipts

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

Date	Name and Residential Address	Amount	Occupation and Employer
	ized Receipts emized Receipts ipts	\$0.00 \$0.00 \$0.00	

Schedule B: Expenditures

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures over \$50 and under may be added together from committee records, and reported on line 13.

Date	Name and Address	Amount	Purpose
7/17/2020	Blount. Linda 43 Fairview Ave Beverly, Ma 01915	\$214.42	Reimbursement (See R1)
	ized Expenditures emized Expenditures nditures	\$214.42 \$0.00 \$214.42	

Schedule C: "Inkind" Contributions

Please itemize contributors who have made inkind contributions of more than \$50. In-kind contributions \$50 and under may be added together, from the committee's records, and included in line 16. An exception to this is that all contributions (under or over \$50) given by persons who have contributed more than \$50 in the calendar year must be itemized. Please report the names and addresses of contributors. Also give the occupation and employer of any contributor who has given an aggregate amount of \$200 or more in the calendar year.

Date	Name and Residential Address	Value	Description Occupation/Employer
Total Unit	ized Inkind Contributions emized Inkind Contributions nd Contributions	\$0.00 \$0.00 \$0.00	

Schedule D: Liabilities

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as the liabilities incurred during this reporting period.

Date To Whom Due Amount Purpose

Total Outstanding Liabilities

\$0.00



Form CPF R1: Itemization of Reimbursements Municipal Form

Office of Campaign and Political Finance

File	wit	th:				
Citv	or	Town	Clerk	or	Election	Commission

1/17/2021

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Individual Being Reimbursed

Committee to re-elect Paul Guanci

Committee Name

\$214.42

Amount of Reimbursement

7/17/2020

Date of Reimbursement

Signed under the penalties of perjury:

Candidate's/Treasurer's signature (in ink)

Date

Date	Vendor Name and Address	Amount	Purpose
7/15/2020	Go Daddy 14455 N Hayden Rd Suite 100 Scottsdale, AZ 85620	\$119.88	Word Press Renewal
7/15/2020	Go Daddy 14455 N Hayden Rd Suite 100 Scottsdale, AZ 85620	\$71.88	1 Year Email Hosting
7/15/2020	Go Daddy 14455 N Hayden Rd Suite 100 Scottsdale, AZ 85620	\$17.99	Paul Guanci.Com Renewal
7/15/2020	Go Daddy 14455 N Hayden Rd Suite 100 Scottsdale, AZ 85620	\$4.67	Tax and Icann Fee